

#10

PATENT APPLICATION FEE DETERMINATION RECORD
Effective November 10, 1998

Application or Docket Number

09/320947

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| FOR | NUMBER FILED | NUMBER EXTRA |
|----------------------------------|-----------------|--------------|
| BASIC FEE | | |
| TOTAL CLAIMS | 15 minus 20 = * | 0 |
| INDEPENDENT CLAIMS | 4 minus 3 = * | 1 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY
OR

| RATE | FEES | RATE | FEES |
|--------|--------|--------|--------|
| | 380.00 | | 760.00 |
| OR | | OR | |
| X\$ 9= | | X\$18= | 0 |
| OR | | X\$18= | 0 |
| X39= | | X78= | 80 |
| OR | | OR | |
| +130= | | +260= | |
| OR | | OR | |
| TOTAL | | TOTAL | 760 |
| OR | | OR | |

OTHER THAN
SMALL ENTITY
OR

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9= | | X\$18= | |
| OR | | OR | |
| X39= | | X78= | |
| OR | | OR | |
| +130= | | +260= | |
| OR | | OR | |
| TOTAL ADDT. FEE | | TOTAL ADDT. FEE | |
| OR | | OR | |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

RATE
ADDI-
TIONAL
FEE

(Column 1) (Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

RATE
ADDI-
TIONAL
FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.